

LOG NUMBERS

BGT.

, 9/26/14 CEO 20053015, SEP 26 2014

EXECUTIVE/COUNCIL APPROVAL FORM**MANAGEMENT ROUTING:****TO: COUNCIL CHAIRPERSON: Dave Somers**

EXECUTIVE John Lovick
 EXEC. DIR. Lenda Crawford
 DIRECTOR/ELECTED Judge Michael Downes
 DEPARTMENT Superior Court
 DIV. MGR. B. Terwilliger/M. Finsen
 DIVISION All
 ORIGINATOR Karen Gahm
 DATE 8/29/14 EXT. 7852

SNOHOMISH COUNTY COUNCIL**EXECUTIVE RECOMMENDATION:**

☒ Approve ☐ No Recommendation
☐ Further Processing
☐ Requested By

Executive Office Signature

CEO Staff Review

Received at Council Office

9/15/14

cep 9/26/14

Att 3:45 9/30/14

DOCUMENT TYPE:**BUDGET ACTION:**

☐ Emergency Appropriation
☐ Supplemental Appropriation
☐ Budget Transfer

CONTRACT:

☐ New
☐ Amendment

GRANT APPLICATION**ORDINANCE**

Amendment to Ord. #

PLAN☒ **OTHER: 2015 Grant Work Plan****DOCUMENT / AGENDA TITLE:**

Snohomish County Superior Court 2015 Grant Work Plan

APPROVAL AUTHORITY:

EXECUTIVE

☒

COUNCIL

CITE BASIS

SCC 2.10.010 (30)

HANDLING:

NORMAL

☒

EXPEDITE

URGENT

DEADLINE DATE

PURPOSE:

To approve the Snohomish County Superior Court 2015 Grant Work Plan

BACKGROUND:

SCC 4.26.025 authorizes the Superior Court Administrator to prepare a Grant Work Plan to be submitted by the County Executive to the County Council for approval. The attached Grant Work Plan describes each grant that is anticipated by Superior Court for calendar year 2015.

FISCAL IMPLICATIONS:

EXPEND: FUND, AGY, ORG, ACTY, OBJ, AU			
Please see attached work plan sheets and summary			

REVENUE: FUND, AGY, ORG, REV, SOURCE			

DEPARTMENT FISCAL IMPACT NOTES:

BUDGET REVIEW: Analyst *[Signature]* Administrator *[Signature]* Recommend Approval *[Signature]*

CONTRACT INFORMATION:

ORIGINAL _____ CONTRACT # _____ AMOUNT \$ _____
SUPPLEMENTAL _____ CONTRACT # _____ AMOUNT _____

CONTRACT PERIOD:

ORIGINAL Start _____ End _____
AMENDMENT Start _____ End _____

CONTRACT / PROJECT TITLE:

Snohomish County Superior Court 2015 Grant Work Plan

CONTRACTOR / ADDRESS (City/State):**APPROVED:**

RISK MANAGEMENT Yes _____ No *N/A*

COMMENTS _____

PROSECUTING ATTY - AS TO FORM: Yes _____ No *N/A*

OTHER DEPARTMENTAL REVIEW / COMMENTS:**ELECTRONIC ATTACHMENTS:** (List & include path & filename for each, e.g. G:\ECAF\deptname\docname_Motion)

G:\ECAF\superior court\140829-2015 Grant Work plan ECAF.docx

G:\ECAF\superior court\2015 Grant Work plan Motion.docx

G:\ECAF\superior court\2015 Grant Work plan Summary.xlsx

NON-ELECTRONIC ATTACHMENTS:

ECAF, Motion, Grant Work Plans, Grant Work Plan Summary

SNOHOMISH COUNTY COUNCIL
Snohomish County, Washington

MOTION NO. 14-372

APPROVING THE 2015 SNOHOMISH COUNTY SUPERIOR COURT
GRANT WORK PLAN

WHEREAS, under the provisions of SCC 4.26.025, the Superior Court Administrator is authorized to prepare an annual grant work plan for approval by the County Council; and

WHEREAS, the Superior Court Administrator has prepared and with the recommendation of the County Executive, has submitted the 2015 Grant Work Plan for Superior Court to the County Council for review and approval; and

WHEREAS, the County Council reviewed the 2015 Grant Work Plan for Superior Court in conjunction with its consideration of the 2015 Budget and has appropriated revenues in the 2015 Budget to fund the programs and grants included in the 2015 Grant Work Plan; and

NOW, THEREFORE, ON MOTION, pursuant to SCC 4.26.025, the Snohomish County Council hereby approves the 2015 Grant Work Plan for Superior Court and authorizes the County Executive to approve all grant documents necessary to implement the approved Grant Work Plan as provided in SCC 2.10.010(30).

PASSED this ____ day of _____, 2014.

SNOHOMISH COUNTY COUNCIL
Snohomish County, Washington

Council Chair

ATTEST:

Asst. Clerk of the Council

2015 Grant Work Plan Summary

Department: Superior Court
Contact: Karen Gahm
Extension: 7852

Date Submitted: 8/29/2014

					This portion to be completed after contract execution and submitted to Council on an annual basis.					
Grantor	Program	Grant Amount	Match	Total Resources	Grant Amount	Match	Total Resources	Date Executed	Effective Date	Term Date
Department of Social and Health Services - Division of Behavioral Health and Recovery (DBHR)	Juvenile Offender Drug Treatment Court	\$130,900	\$0	\$130,900	\$130,900	\$0	\$130,900	6/4/2014	7/1/2014	6/30/2015
Department of Social and Health Services - Juvenile Justice and Rehabilitation Administration (JJ&RA)	Juvenile Accountability Block Grant (JABG) for FY 2015	\$16,954	\$1,695	\$18,649	\$16,954	\$1,695	\$18,649	7/15/2014	7/1/2014	6/30/2015
Administrative Office of the Court	Court Appointed Special Advocate - Volunteer Guardian Ad Litem for FY 2015	\$247,549	\$0	\$247,549	\$247,549	\$0	\$247,549	10/5/2577	7/1/2014	6/30/2015
Department of Social and Health Services - Juvenile Justice and Rehabilitation Administration (JJ&RA)	Community Juvenile Accountability Act (CJAA) Consultant for FY 2015	\$10,024	\$0	\$10,024	\$10,024	\$0	\$10,024	8/19/2013	7/1/2013	6/30/2015
Department of Social and Health Services - Juvenile Justice and Rehabilitation Administration (JJ&RA)	CJAA Quality Assurance Coordinator for FY 2015	\$119,000	\$0	\$119,000	\$119,000	\$0	\$119,000	8/19/2013	7/1/2013	6/30/2015
Department of Social and Health Services - Juvenile Justice and Rehabilitation Administration (JJ&RA)	Consolidated Juvenile Services for FY 2015	\$1,849,284	\$0	\$1,849,284	\$1,849,284	\$0	\$1,849,284	7/12/2013	7/1/2013	6/30/2015
Administrative Office of the Courts	Family and Juvenile Court Integration Program (FJCIP) for FY 2015	\$93,946	\$0	\$93,946	\$93,946	\$0	\$93,946	7/31/2014	7/1/2014	6/30/2015
Department of Social and Health Services - Juvenile Justice and Rehabilitation Administration (JJ&RA)	CJAA Expansion for FY 2015	\$192,114	\$0	\$192,114	\$192,114	\$0	\$192,114	7/9/2013	7/1/2013	6/30/2015
Department of Social and Health Services - Office of Juvenile Justice	Juvenile Detention Alternatives Initiative for FY 2015	\$30,000	\$0	\$30,000	\$30,000	\$0	\$30,000	7/17/2014	7/1/2013	6/30/2014
Office of Civil Legal Aid	Reimbursable payment for attorney fees for youth legally free for 6 months or more	\$75,000	\$0	\$75,000	\$75,000	\$0	\$75,000	8/18/2014	7/1/2014	6/30/2015
Administrative Office of the Courts	Establishing Biological Paternity Early Project in Dependency and Termination cases	\$600	\$0	\$600	\$600	\$0	\$600	8/12/2014	8/1/2014	6/30/2014
Federal Department of Health and Human Services - Substance Abuse and Mental Health Services Administration (SAMHSA)	Juvenile Drug Treatment Courts Enhancement	\$156,872	\$0	\$156,872	\$156,872	\$0	\$156,872	In process	10/1/2014	9/30/2017
Total		\$2,922,243	\$1,695	\$2,923,938	\$2,922,243	\$1,695	\$2,923,938			

Lower by \$1,071 than originally projected in 2015 budget

State takes over contracting with attorneys on 7/1/2015

2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 50936733350

Purpose of Grant CJAA EXPANSION

This is an expansion of the Consolidated Juvenile Services Grant that already exists. These additional dollars provide for more evidence based programming such as Functional Family Therapy and Coordination of Services through the Community Juvenile Accountability Act (CJAA).

Existing/ongoing program ☒ Yes New program ☐ Yes

Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/13 to 6/30/15

Grantor: **Department of Social and Health Services** (JJ&RA)

Grant Award \$192,114 for State FY 2015

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____ DAC _____ Amount _____

Total Resources \$192,114 for State FY 2015

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$192,114 for State FY 2015

Who will complete the work? Existing FTE(s) and Contractors ☒ Existing project FTE(s) ☐

New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

FTEs Classification

Total FTEs _____

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures \$192,114 for State FY 2015

2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 50936731 (10-80)

Purpose of Grant **CONSOLIDATED JUVENILE SERVICES**

This is a Probation Services Grant for a variety of programs and disposition alternatives including Risk Assessment, Chemical Dependency (CDDA) and Sex Offender (SSODA) disposition alternatives, Community Juvenile Accountability Alternative (CJAA) programs and Juvenile Justice reform dollars.

Existing/ongoing program ☒ Yes New program ☐ Yes

Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/13 to 6/30/15

Grantor: **Department of Social and Health Services (JJ&RA)** Grant Award \$1,849,284 for State FY 2015

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$1,849,284 for State FY 2015

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$1,849,284 for State FY 2015

Who will complete the work? Existing FTE(s) and Contractors ☒ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

# FTEs	Classification
--------	----------------

Total FTEs _____

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures \$1,849,284 for State FY 2015

2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 5093673350

Purpose of Grant JUVENILE OFFENDER DRUG TREATMENT COURT EXPANSION

Provide funding for 1 FTE to provide a weekend program for Drug Court youth and it provides funding for treatment for the Juvenile Offender Drug Treatment Court Program.

Existing/ongoing program ☒ Yes New program ☐ Yes

Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From to 7/1/14-6/30/15

Grantor: **Department of Social and Health Services (DBHR)** Grant Award **\$130,900 for State FY 2015**

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$130,900 for State FY 2015

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$130,900 for State FY 2015

Who will complete the work? Existing FTE(s) ☒ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

	# FTEs	Classification
	_____	_____
	_____	_____
Total FTEs	_____	

2. Pass Thru (Estimated cost) \$_____

Total Expenditures \$130,900 for State FY 2015

2015 Grant Work Plan

Department: **Superior Court** Division 36 Fund 130 Program 54036746

Purpose of Grant: FAMILY and JUVENILE COURT IMPROVEMENT PLAN

Snohomish County is funded to operate a program that works to consolidate and coordinate dependency court proceedings so as to both consolidate processes and minimize the time that it takes for proceedings to occur.

Existing/ongoing program ☒ Yes New program ☐ Yes

Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/14 to 6/30/15

Grantor: **Administrative Office for the Courts** Grant Award **\$93,946 for State FY 2015**

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$93,946 for State FY 2015
--

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$93,946 for State FY 2015

Who will complete the work? Existing FTE(s) ☒ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

	# FTEs	Classification
	_____	_____
	_____	_____
Total FTEs	_____	

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures \$93,946 for State FY 2015
--

2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 536367352

Purpose of Grant JUVENILE ACCOUNTABILITY BLOCK GRANT (JABG)

Provide funding for Mental Health Counseling, for the Counselor's participation in staffing meetings and in patient treatment related to the At Risk Youth Drug Treatment Court Participants.

Existing/ongoing program ☒ Yes New program ☐ Yes
Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/14 to 6/30/15

Grantor: **Department of Social and Health Services** (JR&RA) Grant Award **\$16,954 for State FY 2015**

Is match required: ☒ Yes ☐ No If yes, match amount required: \$1,695 for State FY 2015

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

At Risk Youth Attorney (.10% sales tax) DAC 12450236740324106 Amount \$1,695

Total Resources \$16,954 for State FY 2015
--

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$16,954 for State FY 2015

Who will complete the work? Existing FTE(s) and Contractors ☒ Existing project FTE(s) ☐

New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

# FTEs	Classification
_____	_____
_____	_____
Total FTEs	_____

2. Pass Thru (Estimated cost) \$_____

Total Expenditures \$16,954 for State FY 2015

2015 Grant Work Plan

Department: Superior Court Fund 130 Program 130 353740

Purpose of Grant: JUVENILE DETENTION ALTERNATIVES INITIATIVE (JDAI)

To collect, organize and maintain data for the JDAI System Assessment and other required reports. Additional funds will be used for warrant abatement and reduction.

Existing/ongoing program ☒ Yes New program ☐ Yes
Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From July 1, 2014 to June 30, 2015

Grantor: **Office of Juvenile Justice (DSHS)** Grant Award **\$30,000 for State FY 2015**

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$30,000 for State FY 2015
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EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$30,000 for State FY 2015

Who will complete the work? Existing FTE(s) ☒ Existing project FTE(s) ☒ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

# FTEs	Classification
--------	----------------

_____	_____
_____	_____

Total FTEs _____

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures \$30,000 for State FY 2015

2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 5153674510

Purpose of Grant **VOLUNTEER GUARDIAN AD LITEM PROGRAM**

Provide Program Coordinators to recruit, train and work through cases with Volunteer Guardian Ad Litem who serve as advocates for youth in dependency matters.

Existing/ongoing program ☒ Yes New program ☐ Yes

Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/13 to 6/30/15

Grantor: **Administrative Office for the Courts** Grant Award \$247,549 for State FY 2015

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____ DAC _____ Amount _____

_____ DAC _____ Amount _____

Total Resources \$247,549 for State FY 2015

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$247,549 for State FY 2015

Who will complete the work? Existing FTE(s) ☒ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

FTEs Classification

Total FTEs _____

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures \$247,549 for State FY 2015

2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 5093673155

Purpose of Grant **CJAA QUALITY ASSURANCE CONSULTANT**

JRA pays for a Snohomish County Staff member to work with the state wide Quality Assurance Coordinator on a very part time basis to help train and assess Aggression Replacement Training instructors around the state.

Existing/ongoing program ☒ Yes New program ☐ Yes
Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/13 to 6/30/15

Grantor: **Department of Social and Health Services** (JR&RA) Grant Award \$10,024 for State FY 2015

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$10,024 for State FY 2015
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EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$10,024 for State FY 2015

Who will complete the work? Existing FTE(s) ☒ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

	# FTEs	Classification
	_____	_____
	_____	_____
Total FTEs	_____	

2. Pass Thru (Estimated cost) \$_____

Total Expenditures \$10,024 for State FY 2015
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2015 Grant Work Plan

Department **Superior Court** Division 36 Fund 130 Program 5093673155

Purpose of Grant **CJAA STATEWIDE QUALITY ASSURANCE COORDINATOR**

JRA pays for a Snohomish County Staff member to provide quality assurance for the Statewide Aggression Replacement Training Program.

Existing/ongoing program ☒ Yes New program ☐ Yes
Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From 7/1/13 to 6/30/15

Grantor: **Department of Social and Health Services (JR&RA)** Grant Award \$119,000 for State FY 2015

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$119,000 for State FY 2015

EXPENDITURES

1. **Internal Operations** (Admin., Operations, Direct Service, etc.) (Estimated cost) \$119,000 for State FY 2015

Who will complete the work? Existing FTE(s) ☒ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

	# FTEs	Classification
	_____	_____
	_____	_____
Total FTEs	_____	

2. **Pass Thru** (Estimated cost) \$ _____

Total Expenditures \$119,000 for State FY 2015

2015 Grant Work Plan

Department: Superior Court Fund Grant has been awarded and acceptance process on going.
DACs have not been determined.

Purpose of Grant: Juvenile Drug Courts Evidence Based Treatment

This grant will provide treatment dollars allowing Juvenile Drug Court participants and their families to participate in evidence based programs such as Moral Reconation Therapy (MRT) and Functional Family Therapy (FFT). Dollars will also be used to send staff to National Drug Court Conferences.

Existing/ongoing program ☒ Ongoing Drug Courts but new grant dollars New program ☐ Yes
Source of grant funding: Federal ☒ State ☐ Local ☐ Other ☐

Grant Term: From: October 1, 2014 to September 30, 2017 (Federal Fiscal Years)

Grantor: Health and Human Services – Substance Abuse and Mental Health Services Administration
Grant Award **\$156,872 per year for three years. (\$470,616 total)**

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources: \$156,872 for Federal FY 2014

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$156,872 for FFY 2014

Who will complete the work? Existing FTE(s) ☐ Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

	# FTEs	Classification
	_____	_____
	_____	_____
Total FTEs	_____	

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures: \$156,872 for Federal FY 2014

2015 Grant Work Plan

Department: Superior Court Fund Working on DAC structure at this time

Purpose of Grant: Attorney representation to youth who are legally free for six months or more

Payment to Attorneys appointed to represent children whose parental rights have been terminated for six months or more. The State will take over payment directly on July 1, 2015. Sate will fully reimburse for these services.

Existing/ongoing program ☐ Yes New program ☒ Yes

Source of grant funding: Federal ☐ State ☒ Local ☐ Other ☐

Grant Term: From July 1, 2014 to June 30, 2015

Grantor: Grant Award Reimburse costs for specific attorney services estimated at \$75,000

Is match required: ☐ Yes ☒ No If yes, match amount required: _____

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$75,000 estimated
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EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$75,000

Who will complete the work? Existing Contracted Attorneys ☒

Existing project FTE(s) ☐ New FTE(s) ☐

If new FTEs are needed, complete the following. Attach additional sheet if needed.

# FTEs	Classification
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_____	_____
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_____	_____
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Total FTEs _____

2. Pass Thru (Estimated cost) \$ _____

Total Expenditures \$75,000 estimated
